

Amendments to the specification:

On Page 1, delete the entire section entitled "References Disclosed" which appears between the title and "Background of the Invention" heading between lines 3 and 11.

On Page 4, at line 7, please add the heading:

"SUMMARY OF THE INVENTION".

On Page 9, please replace the paragraph beginning, at line 11 and ending at line 24 with the following amended paragraph:

The present invention seeks to overcome prior art design that is fraught with another very significant problem as concerns proper angulation of nasal tubing to deliver PAP. This problem is that often the SAAMS platform is simply too far away, anterior-posteriorly, from the patient's nasal passages to approach the nares from a preferred angle. This is because the TAP/SAAMS design attaches or fits directly over the "Front Assembly (Part # CA-9001)" utilizing a Sheath Slide Extension. The anterior end of the Front Assembly, where the Adjustable Advancement Nut lies, is normally at least 22mm from the labial surface of the maxillary anterior teeth. When the SAAMS tubing retention platform is added/screwed into place on top of the Front Assembly via the Sheath Extension, the PAP nasal tubing is at least 35mm from the labial surface of the maxillary anterior teeth. This design flaw forces the clinician to angulate the nasal tubing in an undesirable manner often resulting in failure to properly seal the nares and maintain the seal while the patient is asleep.

On Page 10, please replace the paragraph beginning, at line 13 and ending at line 26 with the following amended paragraph:

The present invention also envisions a method of changing the Thornton design whereby this limitation in design, which prevents close approximation of the PAP Tubing Retention Platform to more closely approximate access to the nares, is overcome. By removing the Adjustable Advancer Nut and inserting a female threaded stainless steel sleeve into the posterior section of the Front Assembly, a new Sheath Extension can be fit over this remaining section of the Front Assembly to bring a SAAMS' PAP Tubing retention platform closer to the preferred position underneath the patient's nares. Alternatively, a new Front Assembly could be designed without the Adjustable Advancer Nut that includes a built-in PAP Tubing Retention Slide that could be directly screwed into the Locator Plate (Part # CA-9005) allowing closer approximation of the PAP Tubing Retention Platform posteriorly. This would allow the current TAP/SAAMS user to add PAP and reduce distance from the nares by at least 8mm. This would significantly improve the combination therapy described by Thornton.

On Page 10, please replace the paragraph beginning, at line 28 and ending on Page 11 at line 5 with the following amended paragraph:

The "TAP/SAAMS" design incorporates a metal component termed the "Locator Plate (Part # CA-9005)" which is imbedded within the anterior shell of acrylic in the upper arch component of the TAP device. The Front Assembly with Adjustable Advancer Nut is screwed into this Locator Plate via the Locator Nut Set (Part # CA-9007). On top of this is the platform Sheath Extension that in turn screws onto the end of the Adjustable Advancer Nut. Because the Locator Plate is imbedded into the acrylic it can sustain excessive forces due to levering action of the Sheath Extension Slide such that there is a tendency for fracture of the acrylic at the anterior surface of the upper component of the MAD.